

CITY OF DORRIS UTILITY APPLICATION

Today's Date: _____ Residential __ or Business __; _____
(type of business)

Effective Date: _____ Start: __ Stop: __ Change: __ Acct # _____

Full Name: _____ \ _____ \ _____
Driver's License # State

Mailing Address: _____

Telephone Home: _____ Work: _____

Street (Service) Address: _____

Comments/Special Instructions: _____

I/WE AGREE TO ABIDE BY ALL EXISTING AND FUTURE RULES, REGULATIONS, AND ORDINANCES APPLICABLE TO CITY SERVICES. I/WE UNDERSTAND THAT COPIES ARE AVAILABLE FOR REVIEW. I/WE AGREE THAT SERVICES MAY BE TERMINATED FOR NON-COMPLIANCE WITH SAID DOCUMENTS OR FOR FAILURE TO PAY BILLS WHEN DUE, AND THAT IN ADDITION TO LATE FEES WE MAY BE CHARGED COLLECTION COSTS. I/WE ALSO UNDERSTAND THAT THIS IS AN APPLICATION FOR A CHANGE OR FOR NEW SERVICES ONLY, AND NOT A GUARANTEE FOR CITY SERVICES.

SIGNATURE(S): _____

If different from above: **LANDLORD/LEGAL OWNER INFORMATION**

NAME / ADDRESS / CITY / STATE / ZIP PHONE

CITY USE:	Rate Category _____	Monthly Rate	Pro-rated
Received by: _____	Administration: \$ _____		
	Start-up: \$ _____		#of Days: _____
Approval/Review by: _____	Water: \$ _____		\$ _____
	Sewer: \$ _____		\$ _____
PC Entry by: _____ Date: _____	Garbage: \$ _____		\$ _____
	_____ \$ _____		\$ _____
	(OTHER)		
Refund Customer __ Charge Customer __	TOTAL: \$=====		\$=====
